| PATENT APPLICATION FEE DETERMINATION R | | | | | | | | RD | Application or Docket Number | | | |
|--|--|---|-----------------|--------------|---------------------|------------------|--|---------------------|------------------------------|----|---------------------|------------------------|
| Effective October 1, 2004 | | | | | | | | | 10/514417 | | | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL EI TYPE | | OR | OTHER SMALL | – |
| TO | TAL CLAIMS | · · · · · · · · · · · · · · · · · · · | | | | | | RATE | FEE | | RATE | FEE |
| FOR | | | MUMBER FILED | | NUMBER EXTRA | | | BASIC FEE | | OR | BASIC FEE | 050 |
| TOTAL CHARGEABLE CLAIMS | | | /7 minus 20 = . | | • — | | | X\$9= | | OR | X \$ 18 = | / |
| INDEPENDENT CLAIMS | | | minus 3 = | | | | | X \$ 44 = | | OR | X\$88 = | |
| MUR | TIPLE DEPEN | DENT CLAIM P | LESENT · | | | | | + \$ 150 = | | OR | + \$ 300 = | |
| * If the difference in column 1 is less than zero, enter "O" in column 2 | | | | | | | | TOTAL | | OR | TOTAL | 950 |
| CLAIMS AS AMENDED - PART II | | | | | | | | SMALL | ENTITY | OR | OTHER SMALL | |
| AMENDMENTA | 13-04. | CLABAS REMAINING AFTER AMENDMENT | | HIGH | EST BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | . 17 | Minus | - | 11 | 2 | | X\$9= | | OR | X \$ 18 = | |
| | Independent | • 1 | Minus | ••• (| | E | | X \$ 44 = | | OR | X \$ 88 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 150 = | | OR | + \$ 300 = | |
| 16/14(Column 2) (Column 3) | | | | | | | | TOTAL ADOIT, FEE | | OR | ADDIT. FEE | |
| AMENOMENT 8 | 1911 | CLARAS REMAINING AFTER AMENDMENT | · | HIGH | EST BER OUSLY | PRESENT EXTRA | | RATE | ADOI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | 17 | Minus | | 20 | 9 | | X\$9= | | OR | X \$ 18 = | |
| | Independent | . 2 | Minus | *** | 3 | 8 | | X \$ 44 = | | OR | X \$ 88 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 150 = | | OR | + \$ 300 = | |
| | | | | | | | | TOTAL ADDIT. FEE | | OR | YOTAL ADDIT. FEE | |
| (Cotumn 1) (Cotumn 2) (Cotumn 3) | | | | | | | | | | | | |
| AMENDMENT C | | CLAMS REMAINING AFTER AMENOMENT | | NUN PREVE | BER OUSLY FOR | PRESENT EXTRA | | RATE ' | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total · | • | Minus | •• | | = | | X\$9= | | OR | X \$ 18 = | |
| | independent | • | Minus | ••• | | • | | X \$ 44 = | | OR | X \$ 88 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 150 = | | OR | + \$ 300 = | |
| | | | | mn 2 | T to | ome 3 | | TOTAL ADDIT, FEE | | OR | TOTAL ADDIT. FEE | |
| * If the entry in column 1 is less than the entry in column 2, write "C" in column 3. ** If the "Highest Number Previously Paid For St TNIS SPACE is less than "20", enter "20". *** If the "Highest Number Previously Paid For St TNIS SPACE is less than "3", enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in this appropriate box in column 1. | | | | | | | | | | | | |

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